



U.S. Department
of Veterans Affairs

VA Health Care and the Affordable Care Act

Frequently Asked Questions



What is the Affordable Care Act?

The Affordable Care Act, also known as the health care law, was created to expand access to affordable health care coverage to all Americans, lower costs, and improve quality and care coordination. Under the health care law, people will:

- have health coverage that meets a minimum standard (called “minimum essential coverage”) by January 1, 2014;
- qualify for an exemption; or
- pay a fee when filing their taxes if they have affordable options but remain uninsured.

At a glance

- VA wants all Veterans to get health care that improves their health and well-being.
- If you are enrolled in VA health care, you don’t need to take additional steps to meet the health care law coverage standards.
- The health care law does not change VA health benefits or Veterans’ out-of-pocket costs.
- If you are not enrolled in VA health care, you can apply at any time.

If I’m enrolled in a VA health care program, do I meet the requirement for health care coverage?

Yes. If you are enrolled in any of VA’s programs below, you have coverage under the standards of the health care law:

- Veteran’s health care program
- Civilian Health and Medical program (CHAMPVA)
- Spina bifida health care program

What are the benefits of enrollment in VA health care?

Enrollment in VA health care means you have:

- Medical care rated among the best in the U.S.
- Immediate benefits of health care coverage. Veterans may apply for VA health care enrollment at any time.
- No enrollment fee, monthly premiums, or deductibles. Most Veterans have no out-of-pocket costs. Some Veterans may have to pay small copayments for health care or prescription drugs.
- More than 1,700 places available to get your care. This means your coverage can go with you if you travel or move.
- Met the new requirement to have health care coverage that meets the minimum standard.



For more
information
about VA
and ACA.

What about Veterans who experience a medical emergency and have to go to a non-VA hospital? Will the VA still pay?

The health care law does not change VA health care eligibility, benefits or out of pocket costs for Veterans. If a Veteran requires non-VA emergency care, the rules in place today are expected to apply on or after January 1, 2014.

How do I enroll for VA health care coverage?

You may apply in one of three convenient ways: visit www.va.gov/healthbenefits/enroll, call 1-877-222-VETS (8387) or visit your local VA health care facility.

Can I continue to use VA health care with other programs, like private insurance or federal health care programs?

Yes. You can continue to use VA for all your health care needs, or complement your VA care with private health insurance or coverage by other federal health care programs, including Medicare, Medicaid, and TRICARE.

I am enrolled in a VA health care program and also use TRICARE. What does the health care law mean for me?

The health care law does not change VA health benefits or your out-of-pocket costs as VA. The law also does not change your ability to continue to use VA health care with your TRICARE coverage as you can still use both your VA coverage and TRICARE coverage.

Most TRICARE health plan options meet the requirements for minimum essential coverage. For additional information about TRICARE and the health care law, visit www.tricare.mil/Home/Welcome/AboutUs/MEC.aspx.

What does the health care law mean for Veterans living in the US Territories?

All legal residents of Puerto Rico and the United States territories are treated by law as having minimum essential coverage. So they don't need to take additional action.

Are U.S. citizens living abroad required to obtain minimum essential coverage or make a payment when filing taxes for each month lacking coverage?

U.S. citizens who live abroad for a calendar year (or at least 330 days within a 12 month period) are treated as having minimum essential coverage for the year (or period). So they don't need to take additional action.

What's the Health Insurance Marketplace?

The Marketplace is a new way to shop for and purchase private health insurance (for example, health coverage other than VA health care programs) that fits your budget and meets your needs. People who purchase insurance through the Marketplace may be able to lower the costs of health insurance coverage by paying lower monthly premiums

I am enrolled in a VA health care program. Would I be eligible for assistance to pay health insurance premiums on the Marketplace if I choose to purchase health care outside of VA?

Since VA care meets the standard for health care coverage, you wouldn't be eligible for assistance to lower your cost of health insurance premiums if you chose to purchase additional health care coverage outside of VA. However, you may still purchase private health insurance on or off the Marketplace to complement your VA health care coverage.

How will I know if I'm eligible for assistance to purchase health insurance outside of VA?

VA can't make this determination. If you use the Marketplace, you will find out if you can get lower costs on your monthly premiums for private health insurance plans. Remember, if you are enrolled in a VA health care program, you don't need to take additional steps to meet the health coverage requirements under the health care law.

What does the health care law mean for my family members?

Veterans' family members who already receive health care coverage – through their employers, TRICARE or certain VA programs – do not need to take additional steps to meet the health care law coverage standards. Veterans' family members who do not have coverage that meets the health care law's standard should consider their options through the Health Insurance Marketplace. They may get lower costs on monthly premiums or out-of-pocket costs or be eligible for free or low-cost coverage through Medicaid or the Children's Health Insurance Program (CHIP). Starting October 1, they can submit an application for health care coverage through the Marketplace and learn the amount of assistance they are eligible for. For more information, visit www.healthcare.gov.

What happens if I do not have health coverage?

You do not have to pay a fee if you have coverage that meets a minimum standard (called “minimum essential coverage”). If you have access to affordable coverage but remain uninsured starting in 2014, you may have to pay a fee when filing your taxes.

- 2014: \$95 per adult and \$47.50 per child (up to \$285 for a family) or 1.0% of family income, whichever is greater.
- 2015: \$325 per adult and \$162.50 per child (up to \$975 for a family) or 2.0% of family income, whichever is greater.
- 2016: \$695 per adult and \$347.50 per child (up to \$2085 for a family) or 2.5% of family income, whichever is greater.

Exemptions from the fee will be granted under certain circumstances. For more information on exemptions, visit www.healthcare.gov.

Can I cancel my VA health care coverage?

Yes. However, acceptance for future VA health care coverage will be based on eligibility factors at the time of application, which may result in a denial of health care coverage.

Where can I get more information?

For information on VA health care and the Affordable Care Act, visit VA’s website at www.va.gov/aca, or call 1-877-222-VETS (8387), Monday through Friday from 8 a.m. to 10 p.m. or Saturdays from 11 a.m. to 3 p.m., eastern. For information on the Marketplace, visit www.healthcare.gov or call 1-800-318-2596.